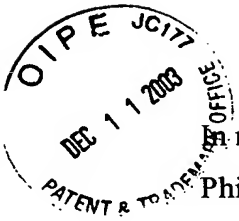


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Re Patent Application of: )

Philip **TONKIN** )

Serial No. 10/089,566 )

Filed: July 1, 2002 )

For: VEHICLE AIR BRAKING SYSTEMS )

Group Art Unit: 3683

Examiner: SICONOLFI, ROBERT

Confirmation No. 3035

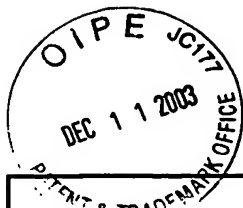
Commissioner of Patents  
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Sir:

**RESPONSE TO NON-FINAL OFFICE ACTION**

In response to the non-final Office Action mailed **September 12, 2003**, the following remarks are submitted in connection with the above-identified application.

**RECEIVED**  
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3683

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/089,566
		Filing Date	July 1, 2002
		First Named Inventor	Philip TONKIN
		Group Art Unit	3683
		Examiner Name	Robert Siconolfi
Total Number of Pages in This Submission		Attorney Docket Number	041618-71

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Jeffrey L. Costellia, Reg. No.: 35,483 Nixon Peabody LLP 401 9 <sup>th</sup> Street, N.W. Suite 900 Washington, D.C. 20004-2128	<b>RECEIVED</b> DEC 16 2003 <b>GROUP 3600</b>
Signature		
Date	December 11, 2003	

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
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